

Fill in this information to identify your case:

Debtor 1	<u>Tewdros</u>	<u>Mengisti</u>	<u>Aftae</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Virginia</u>		
Case number (if known)	_____		

☐ Check if this is an amended plan, and list below the sections of the plan that have been changed.

## Official Form 113

## Chapter 13 Plan

12/17

### Part 1: Notices

**To Debtors:** This form sets out options that may be appropriate in some cases, but the presence of an option on the form does not indicate that the option is appropriate in your circumstances or that it is permissible in your judicial district. Plans that do not comply with local rules and judicial rulings may not be confirmable.

*In the following notice to creditors, you must check each box that applies.*

**To Creditors:** Your rights may be affected by this plan. Your claim may be reduced, modified, or eliminated.

You should read this plan carefully and discuss it with your attorney if you have one in this bankruptcy case. If you do not have an attorney, you may wish to consult one.

If you oppose the plan's treatment of your claim or any provision of this plan, you or your attorney must file an objection to confirmation at least 7 days before the date set for the hearing on confirmation, unless otherwise ordered by the Bankruptcy Court. The Bankruptcy Court may confirm this plan without further notice if no objection to confirmation is filed. See Bankruptcy Rule 3015. In addition, you may need to file a timely proof of claim in order to be paid under any plan.

The following matters may be of particular importance. **Debtors must check one box on each line to state whether or not the plan includes each of the following items. If an item is checked as "Not Included" or if both boxes are checked, the provision will be ineffective if set out later in the plan.**

1.1	A limit on the amount of a secured claim, set out in Section 3.2, which may result in a partial payment or no payment at all to the secured creditor	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not Included
1.2	Avoidance of a judicial lien or nonpossessory, nonpurchase-money security interest, set out in Section 3.4	<input type="checkbox"/> Included	<input checked="" type="checkbox"/> Not Included
1.3	Nonstandard provisions, set out in Part 8	<input checked="" type="checkbox"/> Included	<input type="checkbox"/> Not Included

### Part 2: Plan Payments and Length of Plan

#### 2.1 Debtor(s) will make regular payments to the trustee as follows:

\$412.00 per month for 60 months.

If fewer than 60 months of payments are specified, additional monthly payments will be made to the extent necessary to make the payments to creditors specified in this plan.

**2.2 Regular payments to the trustee will be made from future income in the following manner:**

*Check all that apply.*

- ☐ Debtor(s) will make payments pursuant to a payroll deduction order.
- ☒ Debtor(s) will make payments directly to the trustee.
- ☐ Other (specify method of payment): \_\_\_\_\_.

**2.3 Income tax refunds.**

*Check one.*

- ☒ Debtor(s) will retain any income tax refunds received during the plan term.
- ☐ Debtor(s) will supply the trustee with a copy of each income tax return filed during the plan term within 14 days of filing the return and will turn over to the trustee all income tax refunds received during the plan term.
- ☐ Debtor(s) will treat income tax refunds as follows:
- \_\_\_\_\_

**2.4 Additional payments.**

*Check one.*

- ☒ **None.** If "None" is checked, the rest of § 2.4 need not be completed or reproduced.

**2.5 The total amount of estimated payments to the trustee provided for in §§ 2.1 and 2.4 is \$24,720.00**

**Part 3: Treatment of Secured Claims**

**3.1 Maintenance of payments and cure of default, if any.**

*Check one.*

- ☐ **None.** If "None" is checked, the rest of § 3.1 need not be completed or reproduced.
- ☒ The debtor(s) will maintain the current contractual installment payments on the secured claims listed below, with any changes required by the applicable contract and noticed in conformity with any applicable rules. These payments will be disbursed either by the trustee or directly by the debtor(s), as specified below. Any existing arrearage on a listed claim will be paid in full through disbursements by the trustee, with interest, if any, at the rate stated. Unless otherwise ordered by the court, the amounts listed on a proof of claim filed before the filing deadline under Bankruptcy Rule 3002(c) control over any contrary amounts listed below as to the current installment payment and arrearage. In the absence of a contrary timely filed proof of claim, the amounts stated below are controlling. If relief from the automatic stay is ordered as to any item of collateral listed in this paragraph, then, unless otherwise ordered by the court, all payments under this paragraph as to that collateral will cease, and all secured claims based on that collateral will no longer be treated by the plan. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of Creditor / Collateral	Current Installment Payment (including escrow)	Amount of arrearage (if any)	Interest rate on arrearage (if applicable)	Monthly plan payment on arrearage	Estimated total payments by trustee
Virginia Housing	\$1,605.00	\$1,605.00	0.00 %	Pro-Rata	\$1,605.00
<b>Collateral</b> 2016 Crepe Myrtle Lane Culpeper, VA 22701	Disbursed by: <input type="checkbox"/> Trustee <input checked="" type="checkbox"/> Debtor(s)				
Fifth Third Bank	\$525.00	\$525.00	0.00 %	Pro-Rata	\$525.00
<b>Collateral</b> 2018 Honda Accord	Disbursed by: <input type="checkbox"/> Trustee <input checked="" type="checkbox"/> Debtor(s)				

Name of Creditor / Collateral	Current Installment Payment (including escrow)	Amount of arrearage (if any)	Interest rate on arrearage (if applicable)	Monthly plan payment on arrearage	Estimated total payments by trustee
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Virginia Housing	\$44.00		0.00%	\$0.00 avg.	\$0.00
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**Collateral**  
2016 Crepe Myrtle Lane Culpeper, VA 22701

Disbursed by:  
☐ Trustee  
☒ Debtor(s)

*Insert additional claims as needed.*

**3.2 Request for valuation of security, payment of fully secured claims, and modification of undersecured claims. Check one.**

☒ **None.** If "None" is checked, the rest of § 3.2 need not be completed or reproduced.

**3.3 Secured claims excluded from 11 U.S.C. § 506.**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 3.3 need not be completed or reproduced.

**3.4 Lien Avoidance**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 3.4 need not be completed or reproduced.

**3.5 Surrender of collateral.**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 3.5 need not be completed or reproduced.

**Part 4: Treatment of Fees and Priority Claims**

**4.1 General**

Trustee's fees and all allowed priority claims, including domestic support obligations other than those treated in § 4.5, will be paid in full without postpetition interest.

**4.2 Trustee's fees**

Trustee's fees are governed by statute and may change during the course of the case but are estimated to be 10.00 % of plan payments; and during the plan term, they are estimated to total \$2,472.00.

**4.3 Attorney's fees**

The balance of the fees owed to the attorney for the debtor(s) is estimated to be \$4,500.00.

**4.4 Priority claims other than attorney's fees and those treated in § 4.5.**

*Check one.*

☐ **None.** If "None" is checked, the rest of § 4.4 need not be completed or reproduced.

☒ The debtor(s) estimate the total amount of other priority claims to be \$233.00.

**4.5 Domestic support obligations assigned or owed to a governmental unit and paid less than full amount.**

*Check one.*

☒ **None.** If "None" is checked, the rest of § 4.5 need not be completed or reproduced.

**Part 5: Treatment of Nonpriority Unsecured Claims**

**5.1 Nonpriority unsecured claims not separately classified.**

Allowed nonpriority unsecured claims that are not separately classified will be paid, pro rata. If more than one option is checked, the option providing the largest payment will be effective. *Check all that apply.*

☐ The sum of \_\_\_\_\_.

☒ 28.11 % of the total amount of these claims, an estimated payment of \$15,385.00 .

☒ The funds remaining after disbursements have been made to all other creditors provided for in this plan.

If the estate of the debtor(s) were liquidated under chapter 7, nonpriority unsecured claims would be paid approximately \$15,385.00 . Regardless of the options checked above, payments on allowed nonpriority unsecured claims will be made in at least this amount.

**5.2 Maintenance of payments and cure of any default on nonpriority unsecured claims. Check one.**

☒ **None.** If "None" is checked, the rest of § 5.2 need not be completed or reproduced.

**5.3 Other separately classified nonpriority unsecured claims. Check one.**

☐ **None.** If "None" is checked, the rest of § 5.3 need not be completed or reproduced.

☒ The nonpriority unsecured allowed claims listed below are separately classified and will be treated as follows

Name of creditor	Basis for separate classification and treatment	Amount to be paid on the claim	Interest rate (if applicable)	Estimated total amount of payments
MOHELA	Student loans	\$0.00	0.00 %	\$0.00

*Insert additional claims as needed.*

**Part 6: Executory Contracts and Unexpired Leases****6.1 The executory contracts and unexpired leases listed below are assumed and will be treated as specified. All other executory contracts and unexpired leases are rejected. Check one.**

☐ **None.** If "None" is checked, the rest of § 6.1 need not be completed or reproduced.

☒ **Assumed items.** Current installment payments will be disbursed either by the trustee or directly by the debtor(s), as specified below, subject to any contrary court order or rule. Arrearage payments will be disbursed by the trustee. The final column includes only payments disbursed by the trustee rather than by the debtor(s).

Name of creditor Description of leased property or executory contract	Current installment payment	Amount of arrearage to be paid	Treatment of arrearage (Refer to other plan section if applicable)	Estimated total payments by trustee
Verizon Wireless	\$225.00		0	\$0.00

Wireless Phone Service

Disbursed by:

☐ Trustee

☒ Debtor(s)

*Insert additional claims as needed.*

**Part 7: Vesting of Property of the Estate****7.1 Property of the estate will vest in the debtor(s) upon**

Check the applicable box:

- ☒ plan confirmation.
- ☐ entry of discharge.
- ☐ other: \_\_\_\_\_.

**Part 8: Nonstandard Plan Provisions**

**8.1 Check "None" or List Nonstandard Plan Provisions**

- ☐ **None.** If "None" is checked, the rest of Part 8 need not be completed or reproduced.

*Under Bankruptcy Rule 3015(c), nonstandard provisions must be set forth below. A nonstandard provision is a provision not otherwise included in the Official Form or deviating from it. Nonstandard provisions set out elsewhere in this plan are ineffective.*

**The following plan provisions will be effective only if there is a check in the box "Included" in § 1.3.**

**WDVA -- Payment of Claims, Generally:**

--All creditors must timely file a proof of claim to receive any payment from the Trustee. --If a claim is scheduled as unsecured and the creditor files a claim alleging the claim is secured but does not timely object to confirmation of the Plan, the creditor may be treated as unsecured for purposes of distribution under the Plan. This paragraph does not limit the right of the creditor to enforce its lien, to the extent not avoided or provided for in this case, after the debtor(s) receive a discharge. --If a claim is listed in the Plan as secured and the creditor files a proof of claim alleging the claim is unsecured, the creditor will be treated as unsecured for purposes of distribution under the Plan. -- The Trustee may adjust the monthly disbursement amount as needed to pay an allowed secured claim in full.

**WDVA -- Student Loan Text:**

\*\*\*ATTN: STUDENT LOAN PROVIDERS/SERVICERS. Attn: Fed Loan Servicing, ECMC, Navient, Department of Education and any other parties holding Government guaranteed student loans, servicers and guarantors (Collectively referred to hereafter as "Ed"): The Debtor(s) is/are not seeking nor does this Plan provide for any discharge, in whole or in part of their individual or joint student loan obligations. The Debtor(s) shall be allowed to seek enrollment, or to maintain any pre-petition enrollment, in any applicable income-driven repayment ("IDR") plan with the U.S. Department of Education William D. Ford Federal Direct Loan Program, including but not limited to the Public Service Loan Forgiveness program, without disqualification due to The Debtor's(s') bankruptcy, if otherwise eligible under Federal law. Any direct payments made from the Debtor(s) to Ed since the filing of the Debtor's(s') petition shall be applied to any IDR plan in which the the Debtor(s) was/were enrolled prepetition, including but not limited to the Public Service Loan Forgiveness program, or pursuant to applicable federal regulations. Ed shall not be required to allow enrollment in any IDR unless the Debtor(s) otherwise qualifies(y) for such plan. During the pendency of any application by the the Debtor(s) to consolidate the Debtor's(s') student loans, to enroll in an IDR, direct payment of the Debtor's(s') student loans under an IDR, or during the pendency of any default in payment of the student loans under an IDR, it shall not be a violation of the stay or other State or Federal Laws for Ed to send the Debtor(s') normal monthly statements regarding payments due and other communications including, without limitation, notices of late payments or delinquency. These communications may expressly include telephone calls and e-mails.

**WDVA -- Regarding Part 3.1: Post-Petition Mortgage Fees:**

Any fees, expenses, or charges accruing on claims set forth in Section 3.1 of this Plan which are noticed to the debtors pursuant to Bankruptcy Rule 3002.1(c) shall not require modification of the debtors' plan to pay them. Instead, any such fees, expenses, or charges shall, if allowed, be payable by the debtors outside the Plan unless the debtor chooses to modify the plan to provide for them.

**WDVA -- Note Regarding Part 3.1: Post Petition Auto Drafts**

Any bank, financial institution, or lender to which the Debtor(s) has/have previously consented to auto draft payment from a bank account(s) is expressly authorized to keep such auto-draft in place and to deduct post petition payments from the Debtor's(s') bank account(s) if such payments are required to be paid directly by the Debtor(s) under the terms of this plan. Such a deduction will not be viewed as a violation(s) of the automatic stay. The automatic stay is modified to permit the noteholder(s) or servicing agent(s) for any secured debt(s) being paid by the Debtor(s) to send the payment coupons, payment statements or invoices, notices of late payment, notices of payment changes, notices of servicing transfers, or any other notice, other than a notice of acceleration or demand for payment of the entire balance, normally sent to customers in the ordinary course of business.

**WDVA -- Deficiencies From Surrender of Collateral:**

Any unsecured proof of claim for a claim of deficiency that results from the surrender and liquidation of collateral noted in Part 3.5 of this Plan must be filed or amended by the earlier of the following or such claim shall be forever barred: (1) within 180 days of the date of the first confirmation order confirming a plan providing for the surrender of said collateral, (2) within the time period for the filing of an unsecured deficiency claim as established by any Order granting relief from the automatic stay with respect to said collateral. Said unsecured proof of claim for a deficiency must include appropriate documentation establishing that the collateral surrendered has been liquidated, and the proceeds applied, in accordance with applicable state law.

**WDVA -- Adequate Protection Payments:**

The Debtor(s) propose to make adequate protection payments other than as provided in Local Rule 4001-2. Unless otherwise provided, the monthly payment amounts listed in Parts 3.2 and 3.3 of this Chapter 13 Plan will be paid as adequate protection beginning prior to confirmation to the holders of allowed secured claims.

Part 9: Signature(s):

### 9.1 Signatures of Debtor(s) and Debtor(s)' Attorney

*If the Debtor(s) do not have an attorney, the Debtor(s) must sign below; otherwise the Debtor(s) signatures are optional. The attorney for the Debtor(s), if any, must sign below.*

**X** /s/ Tewdros Mengisti Aftae

Tewdros Mengisti Aftae

Signature of Debtor 1

Executed on 03/31/2022  
MM/ DD/ YYYY

**X.** \_\_\_\_\_

Signature of Debtor 2

Executed on \_\_\_\_\_  
MM/ DD/ YYYY

**X**

/s/ Andrew S. Chen

Signature of Attorney for Debtor(s)

Date 03/31/2022

MM / DD / YYYY

**By filing this document, the Debtor(s), if not represented by an attorney, or the Attorney for Debtor(s) also certify(ies) that the wording and order of the provisions in this Chapter 13 plan are identical to those contained in Official Form 113, other than any nonstandard provisions included in Part 8.**

## Exhibit: Total Amount of Estimated Trustee Payments

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The following are the estimated payments that the plan requires the trustee to disburse. If there is any difference between the amounts set out below and the actual plan terms, the plan terms control.

a.	<b>Maintenance and cure payments on secured claims</b> <i>(Part 3, Section 3.1 total)</i>	<u>\$2,130.00</u>
b.	<b>Modified secured claims</b> <i>(Part 3, Section 3.2 total)</i>	<u>\$0.00</u>
c.	<b>Secured claims excluded from 11 U.S.C. § 506</b> <i>(Part 3, Section 3.3 total)</i>	<u>\$0.00</u>
d.	<b>Judicial liens or security interests partially avoided</b> <i>(Part 3, Section 3.4 total)</i>	<u>\$0.00</u>
e.	<b>Fees and priority claims</b> <i>(Part 4 total)</i>	<u>\$7,205.00</u>
f.	<b>Nonpriority unsecured claims</b> <i>(Part 5, Section 5.1, highest stated amount)</i>	<u>\$15,385.00</u>
g.	<b>Maintenance and cure payments on unsecured claims</b> <i>(Part 5, Section 5.2 total)</i>	<u>\$0.00</u>
h.	<b>Separately classified unsecured claims</b> <i>(Part 5, Section 5.3 total)</i>	<u>\$0.00</u>
i.	<b>Trustee payments on executory contracts and unexpired leases</b> <i>(Part 6, Section 6.1 total)</i>	<u>\$0.00</u>
j.	<b>Nonstandard payments</b> <i>(Part 8, total)</i>	<u>\$0.00</u>
		+
	<b>Total of lines a through j</b>	<div><u>\$24,720.00</u></div>

Fill in this information to identify your case:

Debtor 1	<u>Tewdros</u>	<u>Mengisti</u>	<u>Aftae</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Virginia</u>		
Case number (if known)	_____		

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Employment

##### 1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

##### Employment status

##### Occupation

##### Employer's name

##### Employer's address

##### Debtor 1

☒ Employed ☐ Not Employed

Police Officer

The Rector & Visitors

University of Virginia  
Number Street

Charlottesville, VA 22903-0000

City State Zip Code

How long employed there? 2 years 6 months

##### Debtor 2 or non-filing spouse

☐ Employed ☐ Not Employed

Number Street

City State Zip Code

#### Part 2: Give Details About Monthly Income

**Estimate monthly income as of the date you file this form.** If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	For Debtor 1	For Debtor 2 or non-filing spouse
2. <b>List monthly gross wages, salary, and commissions</b> (before all payroll deductions.) If not paid monthly, calculate what the monthly wage would be.	2. <u>\$5,005.75</u>	<u>\$0.00</u>
3. <b>Estimate and list monthly overtime pay.</b>	3. + <u>\$534.03</u>	+ <u>\$0.00</u>
4. <b>Calculate gross income.</b> Add line 2 + line 3.	4. <u>\$5,539.79</u>	<u>\$0.00</u>



Debtor 1

**Tewdros****Mengisti****Aftae**

First Name

Middle Name

Last Name

Case number (if known) \_\_\_\_\_

		For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....→	4.	\$5,539.79	\$0.00
5. List all payroll deductions:			
5a. Tax, Medicare, and Social Security deductions	5a.	\$858.39	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$191.92	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$54.17	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00	\$0.00
5e. Insurance	5e.	\$439.58	\$0.00
5f. Domestic support obligations	5f.	\$0.00	\$0.00
5g. Union dues	5g.	\$0.00	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00	\$0.00
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$1,544.05	\$0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$3,995.74	\$0.00
8. List all other income regularly received:			
8a. Net income from rental property and from operating a business, profession, or farm			
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$0.00	\$0.00
8b. Interest and dividends	8b.	\$0.00	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive			
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$0.00	\$0.00
8d. Unemployment compensation	8d.	\$0.00	\$0.00
8e. Social Security	8e.	\$0.00	\$0.00
8f. Other government assistance that you regularly receive			
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	8f.	\$0.00	\$0.00
Specify: _____	8f.	\$0.00	\$0.00
8g. Pension or retirement income	8g.	\$0.00	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00	\$0.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00	\$0.00
10. Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse	10.	\$3,995.74	\$0.00
11. State all other regular contributions to the expenses that you list in <i>Schedule J</i> . Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in <i>Schedule J</i> . Specify: <u>Additional Contributions to Household Expenses — Fiancee</u>	11. +		\$1,000.00
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12.		\$4,995.74
13. Do you expect an increase or decrease within the year after you file this form?			
<input type="checkbox"/> No.			
<input checked="" type="checkbox"/> Yes. Explain:		Debtor usually receives cost of living adjustments to income annually.	

Fill in this information to identify your case:

Debtor 1	<u>Tewdros</u>	<u>Mengisti</u>	<u>Aftae</u>
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	_____	_____	_____
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the:	<u>Western District of Virginia</u>		
Case number (if known)	_____		

Check if this is:

☐ An amended filing

☐ A supplement showing postpetition chapter 13 income as of the following date:

\_\_\_\_\_  
MM / DD / YYYY

## Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Your Household

1. Is this a joint case?

☒ No. Go to line 2.

☐ Yes. Does Debtor 2 live in a separate household?

☐ No

☐ Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

☐ No

☒ Yes. Fill out this information for each dependent.....

Do not list Debtor 1 and Debtor 2.

Do not state the dependents' names.

**Dependent's relationship to Debtor 1 or Debtor 2**

**Dependent's age**

**Does dependent live with you?**

Child

8 years

☐ No. ☒ Yes.

Child

7 years

☐ No. ☒ Yes.

Child

2 years

☐ No. ☒ Yes.

☐ No. ☐ Yes.

☐ No. ☐ Yes.

3. Do your expenses include expenses of people other than yourself and your dependents?

☒ No

☐ Yes

### Part 2: Estimate Your Ongoing Monthly Expenses

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

Your expenses

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

4. \$1,605.00

If not included in line 4:

4a. Real estate taxes

4a. \$0.00

4b. Property, homeowner's, or renter's insurance

4b. \$0.00

4c. Home maintenance, repair, and upkeep expenses

4c. \$50.00

4d. Homeowner's association or condominium dues

4d. \$30.00

Debtor 1 Tewdros Mengisti Aftae  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

		Your expenses
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. <u>\$44.00</u>
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. <u>\$60.00</u>
6b.	Water, sewer, garbage collection	6b. <u>\$45.00</u>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. <u>\$380.00</u>
6d.	Other. Specify: <u>See Additional Page</u>	6d. <u>\$70.00</u>
7.	<b>Food and housekeeping supplies</b>	7. <u>\$180.00</u>
8.	<b>Childcare and children's education costs</b>	8. <u>\$200.00</u>
9.	<b>Clothing, laundry, and dry cleaning</b>	9. <u>\$150.00</u>
10.	<b>Personal care products and services</b>	10. <u>\$125.00</u>
11.	<b>Medical and dental expenses</b>	11. <u>\$140.00</u>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. <u>\$375.00</u>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. <u>\$150.00</u>
14.	<b>Charitable contributions and religious donations</b>	14. <u>\$0.00</u>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. <u>\$0.00</u>
15b.	Health insurance	15b. <u>\$0.00</u>
15c.	Vehicle insurance	15c. <u>\$120.00</u>
15d.	Other insurance. Specify: _____	15d. <u>\$0.00</u>
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: <u>See Additional Page</u>	16. <u>\$60.00</u>
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. <u>\$525.00</u>
17b.	Car payments for Vehicle 2	17b. <u>\$0.00</u>
17c.	Significant Other's Debts (Medical and Credit Card)	17c. <u>\$0.00</u>
17d.	Other. Specify: _____	17d. <u>\$0.00</u>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	18. <u>\$0.00</u>
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. <u>\$0.00</u>
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. <u>\$0.00</u>
20b.	Real estate taxes	20b. <u>\$0.00</u>
20c.	Property, homeowner's, or renter's insurance	20c. <u>\$0.00</u>
20d.	Maintenance, repair, and upkeep expenses	20d. <u>\$0.00</u>
20e.	Homeowner's association or condominium dues	20e. <u>\$0.00</u>

Debtor 1 Tewdros Mengisti Aftae  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: See Additional Page

21. **+** \$250.00

22. **Calculate your monthly expenses.**

22a. Add lines 4 through 21.

22a. \$4,559.00

22b. Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2

22b. \$0.00

22c. Add line 22a and 22b. The result is your monthly expenses.

22c. \$4,559.00

23. **Calculate your monthly net income.**

23a. Copy line 12 (your combined monthly income) from *Schedule I*.

23a. \$4,995.74

23b. Copy your monthly expenses from line 22c above.

23b. -\$4,559.00

23c. Subtract your monthly expenses from your monthly income.

23c. \$436.74

The result is your *monthly net income*.

24. **Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

☒ No.

☐ Yes.

None

Debtor 1      Tewdros      Mengisti      Aftae      Case number (if known) \_\_\_\_\_  
 First Name      Middle Name      Last Name

		Amount
<b>6d. Other Utilities</b>		
Subscriptions		\$50.00
Home Security		\$20.00
<b>9. Clothing, laundry, and dry cleaning</b>		
Clothing		\$112.50
Laundry		\$37.50
Dry Cleaning		\$0.00
<b>12. Transportation: gas, maintenance, bus or train fare</b>		
Gasoline — 2018 Honda Accord		\$300.00
Residual Maintenance — 2018 Honda Accord		\$75.00
Gasoline — 2000 Toyota Corolla		\$0.00
Residual Maintenance — 2000 Toyota Corolla		\$0.00
<b>16. Taxes</b>		
Amortized Personal Property Tax — 2018 Honda Accord		\$60.00
Amortized Personal Property Tax — 2000 Toyota Corolla		\$0.00
<b>21. Other</b>		
Children's Activities		\$100.00
Misc		\$150.00

Amex  
PO Box 981540  
El Paso, TX 79998

Bank of America  
4909 Savarese Circle  
Tampa, FL 33634

Chase Card Services  
Attn: Bankruptcy  
PO Box 15298  
Wilmington, DE 19850-0000

Citibank North America  
Citibank SD MC 425 5800 South Corp  
Place  
Sioux Falls, SD 57108

Conway Law Group PC  
12934 Harbor Drive  
Woodbridge, VA 22192

Discover Personal Loans  
Attn: Bankruptcy  
PO Box 30954  
Salt Lake City, UT 84130-0954

Diversified Adjustment  
Services, Inc  
Attn: Bankruptcy  
PO Box 32145  
Fridley, MN 55432

Fifth Third Bank  
P.O. Box 630778  
Cincinnati, OH 45263-0000

First National Bank  
PO Box 3128  
Omaha, NE 68103

IRS  
PO Box 7346  
Philadelphia, PA 19101-0000

MOHELA  
Attn: Bankruptcy 633 Spirit Drive  
Chesterfield, MO 63005-1243

Pentagon Federal Credit  
Union  
1001 N. Fairfax  
Alexandria, VA 22314

Prime Inc.  
2740 N Mayfair Ave  
Springfield, MO 65803

Sprint Corp.  
Attn: Bankruptcy Dept.  
PO Box 7949  
Overland Park, KS 66207-0949

Synchrony/Ashley Furniture  
Homestore  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Synchrony/PayPal Credit  
Attn: Bankruptcy  
PO Box 965060  
Orlando, FL 32896-5060

Trac/CBCD/Citicorp  
Citicorp Credit/Centralized Bankruptcy  
PO Box 6497  
Sioux Falls, SD 57117

UVA Health System  
PO Box 743977  
Atlanta, GA 30374-0000

Verizon Wireless  
PO Box 5029  
Wallingford, CT 06492

Virginia Housing  
Attn: Bankruptcy 601 South Belvidere  
Street  
Richmond, VA 23220

Wells Fargo Bank NA  
MAC X2303-01A  
1 Home Campus  
Des Moines, IA 50328-0010

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